



Atty. Dkt. No. 053466-0325

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Hiroyuki SAITO et al.  
Title: PREVENTION AND  
TREATMENT OF BLOOD  
COAGULATION-RELATED  
DISEASES  
Appl. No.: 10/089,501  
International  
Filing Date:  
371(c) Date: 4/22/2002  
Examiner: Burkhardt, Michael D.  
Art Unit: 1633  
Confirmation  
Number: 9449

**REQUEST FOR CONTINUED EXAMINATION (RCE)**  
**TRANSMITTAL**

**Mail Stop RCE**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

This is a Request for Continued Examination (RCE) under 37 C.F.R. § 1.114 of the above-identified application. This RCE and the enclosed items listed below are being filed prior to the earliest of: (1) payment of the issue fee (unless a petition under 37 C.F.R. § 1.313 is granted); (2) abandonment of the application; or (3) the filing of a notice of appeal to the U.S. Court of Appeals for the Federal Circuit under 35 U.S.C. § 141, or the commencement of a civil action under 35 U.S.C. § 145 or § 146 (unless the appeal or civil action is terminated).

1. **Submission required under 37 C.F.R. § 1.114:** (check items that apply)

a. Previously submitted:

05/30/2007 JADD01  
01 FC:1801  
02 FC:1252

00000146 10089501

790.00 OP  
450.00 OP

- ☐ Please enter and consider the amendment and/or reply previously filed on \_\_\_\_.
- ☐ Please consider the Affidavit(s)/Declaration(s) previously filed on \_\_\_\_ but not considered.
- ☐ Please consider the arguments in the Appeal Brief or Reply previously filed on \_\_\_\_.
- ☐ Other \_\_\_\_.
- b. Enclosed are:
- ☒ Amendment/Reply.
- ☐ Affidavit(s)/Declaration(s).
- ☐ Information Disclosure Statement.
- ☐ Form PTO/SB/08 with copies of \_\_\_\_ listed reference(s).
- ☐ Other .

## Miscellaneous:

- ☐ Suspension of action of the above-identified application is requested under 37 C.F.R. § 1.103(c) for a period of \_\_\_\_ months.

The filing fee is calculated below:

	Claims as Amended	Previously Paid For	Extra Claims Present	Rate	Fee Totals
RCE Fee 1.17(e):				\$790.00	= \$790.00
Total Claims:	12	- 53	= 0	x \$50.00	= \$0.00
Independents	1	- 6	= 0	x \$200.00	= \$0.00
First presentation of any Multiple Dependent Claims:				+ \$360.00	= \$0.00
CLAIMS FEE TOTAL:					= \$790.00

☒ Applicant hereby petitions for an extension of time under 37 C.F.R. §1.136(a) for the total number of months checked below:

<input type="checkbox"/>	Extension for response filed within the first month:	\$120.00	0	\$0.00
<input checked="" type="checkbox"/>	Extension for response filed within the second month:	\$450.00		\$450.00
<input type="checkbox"/>	Extension for response filed within the third month:	\$1,020.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fourth month:	\$1,590.00		\$0.00
<input type="checkbox"/>	Extension for response filed within the fifth month:	\$2,160.00		\$0.00
EXTENSION FEE SUBTOTAL:				\$450.00
EXTENSION FEE ALREADY PAID: -				\$0.00
EXTENSION FEE TOTAL				\$450.00
CLAIMS AND EXTENSION FEE TOTAL:				\$1240.00
<input type="checkbox"/>	Small Entity Fees Apply (subtract ½ of above):			\$0.00
<input type="checkbox"/>	Suspension of action requested under 37 C.F.R. § 1.103(c)			\$0.00
TOTAL FEE:				\$1240.00

A credit card payment form in the amount of \$1240.00 to cover the filing fee is enclosed.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.17, or credit any overpayment, to Deposit Account No. 19-0741. Should no proper payment be enclosed herewith, as by the credit card payment form being unsigned, providing incorrect information resulting in a rejected credit card transaction, or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 19-0741.

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date May 29, 2007

By 

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